

STATE OF MONTANA

Prepare, sign, submit with an original signature and filing fee
This is the minimum information required

STATEMENT of CHANGE of REGISTERED AGENT and/or REGISTERED OFFICE

MAIL: **BRAD JOHNSON**
Secretary of State
P.O. Box 202801
Helena, MT 59620-2801

PHONE: (406)444-3665
FAX: (406)444-3976
WEB SITE: *sos.mt.gov*



(This space for use by the Secretary of State only)

No Fee

- ☐ 24 Hour Priority Filing Add \$ 20.00
☐ 1 Hour Expedite Filing Add \$100.00

For the purpose of having and continuously maintaining a registered agent at a registered office **within the State of Montana**, the undersigned submits the following statements of fact to the Secretary of State:

- ☐ Corporation (35-1-314, 35-1-1033, 35-2-310, 35-2-828, MCA)
☐ Limited Liability Company (35-8-105, MCA)
☐ Limited Partnership (35-12-507, MCA)
(please check one box above)

1. The exact name of the entity:

Newly Appointed Registered Agent Information

2. The name of the newly appointed registered agent: _____

3. The street and mailing address of the newly appointed registered office (must be in Montana):

(Include street name and number or physical location in addition to box number with the city and zip)

Signature of consent of new agent (required if changed): _____

4. The undersigned further states that the street addresses of its registered office and the address of the business office of its registered agent, as changed, will be identical.
5. By my signature, I, as an official of the above corporation, do state that I signed this statement on behalf of the corporation and that the statements contained therein are true, under penalty of false swearing.

Signature of Officer/Chair of the Board/Member/Manager/General Partner

Dated (Mo/Day/Yr)

Printed Name and Title of above Authorized Person